

Background

During the first lockdown, 2.2million¹ people were advised to shield. This included those who are classified as “clinically extremely vulnerable” (CEV) to coronavirus (Covid-19) – people who use ventilators already, are massively immunosuppressed, have had solid organ transplants or similar². It also included those who have been classed as CEV or ‘clinically vulnerable’ (CV), based on the clinical judgement of GPs and hospital clinicians.³ During this lockdown, Shielders were advised to follow strict government guidance to protect themselves from becoming severely unwell from Covid-19. This was for 12 weeks and was made possible by food box deliveries and access to priority supermarket slots, organised through efforts from central and local government, as well as grocery retailers. NHS volunteers and pharmacies coordinated medication deliveries. The wider community also came together to help through mutual aid groups and food banks.⁴ This was crucial in financially and practically supporting those 2.2million people to effectively follow shielding guidance.

In the second lockdown, Shielders did not see the same level of practical support from local and central government to assist them in following the guidance. The government advised Shielders to access support by registering with the NHS Volunteer Responders Service and to access support from local charities and organisations to help with shopping and medicines delivery, transport to medical appointments and social support via calls. However, community groups have not been able to operate in the same way as previously, as many volunteers have returned to work. Supermarkets have allowed those that registered during the first lockdown to remain on their priority lists, but Shielders have continued to struggle to access delivery slots when needed. The cost of deliveries remains a key barrier to accessing online

¹ [Coronavirus and shielding of clinically extremely vulnerable people in England - Office for National Statistics \(ons.gov.uk\)](https://ons.gov.uk)

² <https://digital.nhs.uk/coronavirus/shielded-patient-list>

³ [Guidance on shielding and protecting people who are clinically extremely vulnerable from COVID-19 - GOV.UK \(www.gov.uk\)](https://www.gov.uk)

⁴ [Food banks report record spike in need as coalition of anti-poverty charities call for strong lifeline to be thrown to anyone who needs it - The Trussell Trust](#)

orders and the impact of isolation and loneliness is pushing many to crisis point.

We entered a third national lockdown at the beginning of January 2021 due to a new and more infectious Covid-19 variant⁵. This means that those identified as CEV must now shield again. However, the government have stated that food boxes will not be provided to support Shielders.⁶ Instead, they have pointed to priority delivery slots from supermarkets, which from our research shows that Shielders are struggling to access. Moreover, this lockdown is not as strict as the first national lockdown in March 2020⁷, despite significant pressures on the NHS from Covid-19 and the Mayor of London declaring a major incident in the city as the number of cases in hospitals reach a critical level.⁸

The following data was gathered from Inclusion London's 'Lockdown Lifting' survey which had over 500 responses between July and September 2020. This assesses the impact of the first lockdown on Shielders. Data was also gathered from a focus group that took place on November 24th 2020 comprised of key parliamentarians, local government councillors and members of the public, all of whom were shielding. This was used to assess the impact of the second lockdown on Shielders. Using the issues identified, immediate and long-term policy recommendations have been suggested to improve the situation of Shielders.

⁵ <https://www.gov.uk/government/news/confirmed-cases-of-covid-19-variant-from-south-africa-identified-in-uk>

⁶ [Government will not provide food boxes for shielding people this lockdown | News | The Grocer](#)

⁷ [Covid-19: Lockdown needs to be stricter, scientists warn - BBC News](#)

⁸ [Mayor declares 'major incident' following rapid spread of Covid-19 | London City Hall](#)

Executive Summary

Key Issues

- Mental Distress
- Access to Healthcare
- Access to Food
- Employment
- Housing
- Financial Difficulties
- Right to Life
- Social Care and Community Support
- Value of Disabled Lives
- Isolation and Loneliness

Summary of Recommendations

Immediate asks:

- A financial stimulus package for Shielders
- Support from supermarkets and online retailers
- Give Local Authorities funding to support Shielders
- A vaccine education programme
- Improve access to healthcare
- Investment in mental distress support
- Improved digital accessibility and clarity of guidance
- An auditing scheme for Covid-secure organisations

Long term asks:

- Access to broadband, technology and training
- A guarantee that homeworking will be offered after the pandemic
- Equality impact assessments for all measures responding to Covid-19 to assess how they will affect Disabled people

Issues Identified: Lockdown 2

Participants in our focus group were asked whether there were any ongoing issues during the second lockdown and if there were any new issues they had experienced whilst shielding. The following issues were identified.

Access to Food

- High shopping and food delivery costs
 - We were told in our focus group:
 - *“I live on the 11th floor, they put my food outside the main door to the building. Have to spend £40 minimum for food. The government forms still require you to fill [them] out by hand. Used to get GP to do it but I would prefer to do it myself on the computer. It assumes you have a helper to do these things. Due to the pandemic it got harder.”* – 24th November
 - *“I tried to order from the Morrisons shielding phone line because the website didn’t recognise my address. I had to tell the person each item individually, which came to over £80. But, when my order was delivered, lots of the items were wrong and most missing. For example, I ordered lots of frozen vegetables, but got fresh instead and my gluten and milk free items were substituted with items that had gluten and milk in. I also had to pay by card when they arrived, which came to under £30. I was charged about £4 for this delivery. I tried calling to complain and I was told that I’d get someone to sort it out in the next 72 hours. They never rang in the end. The government need to resume the food boxes because the supermarket priority delivery service obviously has poor quality control and Shielders are the ones forking out £4 every couple of weeks. I simply can’t afford this! They should waive the fee or reduce it to an affordable price like 50p”* - 24th November

Access to Healthcare

- Healthcare has been replaced by phone/video call appointments. For those that need in-person monitoring, this is not sufficient and has led to significant declines in health.
 - We were told in our focus group:
 - *“Had issues with my sight, lost my whole vision in one eye. The other eye is non functional sight, this impacts on me and my work. [Eye hospital] wanted to monitor me from afar. Lack of NHS appointments has impacted my sight. Worried I could lose my job because I cannot do certain tasks. Worried I need surgery.”* – 24th November

- GPs refusing house visits for flu jabs who are advertised as Covid-safe, but in reality increase the risk of those in the CEV category
 - A focus group participant told us:
 - *“Needed flu jab in September, had to go to the surgery but wanted a home visit. Wouldn’t allow me as I am not house bound. [They] allowed myself and my PA to go into the waiting room, but they allowed others in. Didn’t feel I had too much contact with others yet if I was in a higher [risk] category, I would be concerned about not having a home visit.” – 24th November*

- Private dental healthcare debt incurred due to a lack of access to NHS dental care
 - A focus group participant told us:
 - *“I still can't get the dental care I need on the NHS despite my jaw condition. I couldn't get a new tooth guard so I have broken teeth and infections from start of first lockdown. So far we have spent £1,600.000 on dental treatment because I had to go private or have my teeth extracted, and have more break. Its shocking and we did it on a credit card I have no idea how we will pay it back. Its more than my usual personal annual income.” – 24th November*

Social Care

- Problems hiring new care staff at short notice
 - We heard that following from our focus group:
 - *“I hired new staff member during first lockdown. But we can't do the CRB checks because of Covid and I had to sign a waiver. I just needed to hire in a hurry as my care needs weren't being met leading to a decline in my health. Then three weeks in with the new staff member, it began to appear medication was going missing. Within a week we knew how much. I had to call the insurance the broker and police became involved. We still don't know if or when it's going to court. That was frightening as he is a big man and I feel vulnerable as he was showering me etc whilst stealing my controlled drugs!!” -24th November*

- Problems accessing tests for carers meaning 2 weeks of self-isolation is required leaving Disabled people without care for that period
 - In our focus group we were told:
 - *“Unfortunately Covid situation continues to affect staffing. Because any time the staff may have come into contact with Covid they need to stay off a fortnight because they couldn't get tests. This happened twice between lockdowns. Any time the staff or a housemate have any slight illness I need them to stay home for a week this has happened*

once. Any time that they have suspected Covid or a house mate they need testing before they come back.” – 24th November

Value of All Disabled People’s Lives

- Problems addressing the multifold impact of being BAME and Disabled and the increased risk of Covid-19 to those falling into these groups.
 - In our focus group we were told:
 - *“Government has set out a report about why people from certain races were susceptible to Covid, think there needs to be something about disabled people. ONS stats say 60% of disabled people have died from Covid. Think there needs to be a review or investigation.” – 24th November*

Isolation and Loneliness

- Isolation from working from home and the lack of face-to-face interaction
 - In our focus group we were told:
 - *“The pandemic has meant a huge change for me. Before the pandemic, I would go into the office every day. There would be lots of conversations between colleagues. Before the pandemic I would go out at least 4 or 5 times a week and see friends or go to the theatre or go to charity meetings. After the pandemic, I wasn’t going into the office anymore. I couldn’t invite friends round because i’m shielding. I felt isolated quite a lot. Luckily I have some great friends and we did at least 1 Zoom call a day and online pub quizzes. They helped a lot, but seeing people on a screen is not the same as seeing people face-to-face.” – 24th November*
- Shielders have been side-lined when requesting support from local authorities and when challenging the lack of support
 - In our focus group we were told:
 - *“I was someone that represented Disabled students and continue to informally. It has been particularly difficult continuing that essential work. One thing that has been personally difficult for me, because of the position I’m in as a Disabled person that’s required to shield because of my conditions, is that it’s become incredibly easy to be sidelined from Local Authority decisions. It’s been incredibly professionally difficult because, all of a sudden, they can claim that they forgot to send an email or that there were technical difficulties with including you, so it’s difficult to challenge people on student policies. Professionally, it’s been incredibly difficult to work, even unpaid, in that role because of the fact that they know that you’re shielding. They know that you’re facing difficulties in your personal life, so it’s much easier to just sideline you.” – 24th November*

- Loneliness and isolation for the past 11 months, coupled with a lack of good (practical and political) support from the government is pushing Shielders to crisis point
 - In our focus group we were told:
 - *“I’ve really struggled with isolation and loneliness. I was asked to shield in March and got the letter suddenly when I was convinced I wouldn’t need to. It’s been really hard because I live by myself for access reasons. I live in a flat that has no real windows that open because it’s a listed building that has been converted into new flats. It’s also north facing, so I don’t get a lot of light. This was fine until the days started getting shorter and winter came around. My mental health has taken a huge dip because I haven’t been able to see anyone properly because of shielding guidance. I tried to fast for Ramadan between April and May by myself and that was really hard. I stopped after 10 days because I realised I was becoming mentally really unwell with the isolation and you’re not supposed to fast if you’re too ill – you’re medically exempt. I don’t have a supportive family, so I was relying on my best friend as my support bubble from September, but she’s flying back to the US for the Christmas holidays soon. I’ve tried to call friends over Zoom, but that isn’t the same as seeing friends face-to-face. I’ve been working from home since July too in a new role, which has been great apart from the isolation. I want to meet and socialise with my colleagues in London, but I can’t because I’m shielding and it’s not safe to travel on public transport. The winter months and the second lockdown with no support from the government, not even the food parcel, really put into perspective how devalued and expendable I felt. I’ve been doing my best, but after 9 months of being alone, I’ve reached crisis point and my mental health has been the lowest it has ever been in 7 years. The worst part of it is that my psychiatric team can’t do anything other than offer me a couple of check in calls. Everyone else around me has been making plans for Christmas and the New Year, whilst I’ve been making plans to end my life. It’s been really scary. I want the government to stop saying they’re helping us, because in reality they aren’t doing anything. They’re just letting us die.” – 24th November*

Issues Identified: Lockdown 1

The following points summarise the main insights, experiences and ideas that were shared in our 'Lockdown Lifting' survey during the first lockdown and during our focus group in the second lockdown.

Mental Distress

- Loneliness and isolation played a large part in the mental distress of Shielders during the first lockdown
 - One survey respondent told us that:
 - *"Anxiety [has] increased as people are not following guidance on social distancing...depression that everyone is returning to normal life, while many like me are completely left out of conversations and expected to continue to shield while the rest of the world can get life back. What about us ill/disabled getting a quality of life too??"* – 9th July
 - This was echoed by participants in our focus group:
 - *"First lockdown was very lonely, didn't leave my flat. I was terrified. Developed a bubble with my one friend. Isolation and mental health are a huge issue."* – 24th November

Access to Healthcare

- Problems with delayed and cancelled appointments
 - In our survey we were told:
 - *"Pain management treatment halted leaving me in severe pain - alternative management hasn't [been] effective. Physio to determine if I need age-critical surgery is suspended indefinitely, I could end up too old to have the surgery by the time physio restarts and orthopaedics re-open. The impact is severe pain and permanently worsened mobility."* – 9th July
 - *"All appointments cancelled but now being told i must come to hospital despite saying i'm shielding. 90 minute journey by bus each way!!!"* – 12th July
- Problems with inaccessible medical appointments
 - In our survey we were told:
 - *"Everything is accessible only by telephone which is inaccessible to people who are deaf and hearing impaired. Hospital appointments are over the phone. Inaccessible. Doctors appointment over the phone inaccessible."* – 25th July

- Problems getting prescriptions delivered by pharmacies
 - One focus group participant told us:
 - *“Prescriptions were difficult to get hold of due to them not giving them to people other than me. They said I had to come into the shop but as a wheelchair user not everything was accessible. I couldn’t get the items I needed because of the measures that were meant to support me did the opposite, for 2 months I relied on a friend to get stuff for me. Backward policies, meant to protect everyone but me.”* – 24th November

Access to Food

- Problems with the nutritional value of government food parcels
 - In our focus group, we were told:
 - *“Started shielding from 28th Feb. [Wasn’t] until the 22nd May I was able to access emergency food packages, they were awful and bad quality, couldn’t eat anything from it. Cultural issues. June the 1st was the first time we could get online food shop. Kept emailing them through the pandemic, didn’t get much response. Stressful time. Asked WhatsApp neighbour group to get me things such as fruit and veg.”* – 24th November
- Problems arranging food deliveries, especially for those not officially on the shielding list
 - In our focus group, we were told:
 - *“Started shielding on the 9th March. Took 3 weeks to get my shielding to be registered. I am independent, despite having carers coming in. Ended up relying on the community kitchen for food. Eventually got food delivery.”* – 24th November
- Problems registering for the official shielding list for a food delivery slot
 - In our focus group, we were told:
 - *“Had online deliveries for years from Sainsburys. [They] started to restrict to clinically vulnerable people (+70 years old). Had to ring hotline number to register, couldn’t get through. Registered as clinically vulnerable, could get online deliveries from there. Was difficult to get onto the list by ringing the number.”* - 24th November

Value of Disabled People’s Lives

- Medical clinicians inappropriately suggesting DNR (Do Not Resuscitate) notices
 - One survey respondent told us:
 - *“Forcing disabled people (but not me) to sign DNR orders and deny treatment based on a doctors’ ableist assumptions about disabled quality of life. Significant ableism in media - often only referring to*

older shielders. The phraseologies around vulnerable and with ongoing health issues being framed in subtext as almost deserving death/serious illness and meaning non-disabled don't have to worry - "illness happens to others" and feed ableism." – 9th July

- Disabled people felt their lives were not valued
 - This was also evident in our focus group:
 - *"I was told if I get Covid I [must] agree to certain measures about protecting myself and others. [I felt] pressure that my life isn't important. Without my friends helping me I wouldn't be here." – 24th November*

Employment

- Lack of support for unemployed Disabled people, or those that are self-employed and cannot do their work from home
 - We were told by one focus group participant:
 - *"My job got cut, I was supposed to be shielding and get a source of income. Government did nothing for me." – 24th November*
- Statutory Sick Pay is not enough to live on and time limited
 - We were told:
 - *"Statutory sick pay can only be claimed for 28 weeks? Some employers pushed shielders to claim SSP, instead of Furlough" – 24th November*
- Whilst some employers have been supportive to employees that are shielding by facilitating homeworking and reasonable adjustments, others have faced redundancies instead of furlough⁹
 - In our survey we were told:
 - *"I am unable to work remotely for disability (deafness) reasons. My employer was originally going to give me alternative tasks as a reasonable adjustment, but then decided they couldn't be bothered. I have felt very abandoned by my employer being unwilling to consider adjustment tasks which are available. I have had to line up legal advice as I expect my employer to try and end my employment in August. Last time I was unemployed I applied for 30+ jobs and got a lot of disablism in recruitment and that wasn't during a pandemic/recession." - 9th July*

⁹ <https://www.citizensadvice.org.uk/about-us/how-citizens-advice-works/media/press-releases/many-in-shielded-group-facing-catch-22-as-incomes-plummet/>

Housing

- Renters have had their housing rights dismissed
 - One focus group participant told us:
 - *“Huge amount of stress dealing with letting agency, they didn’t know the law. My lease was up. Tried to force people to visit my small studio flat. I am homeless in 7 days, moving in with friend.”* – 24th November

Financial Difficulties

- Financial debt from the increasing cost of deliveries
 - We were told in our focus group:
 - *“I am also in debt and paying a lot for online food deliveries, need evidence for it. My freelance work has diminished. Bureaucratic nonsense, things that were meant to fast track us weren’t considered. Was spending money on food and medications rather than looking for sources of income.”* – 24th November

Social Care and Community Support

- Problems with NHS and mutual aid group volunteers
 - We were told in our focus group:
 - *“Another issue - contacting NHS volunteers to get our prescriptions picked up by someone else. Contacted mutual aid group to get someone to shop for us. Volunteers ranged in quality, had a poor experience with a rude person who wanted the money straight away and asked for more money than the shopping was.”* – 24th November
- Social care package reduced due to carers not having PPE
 - We were told in our focus group:
 - *“[I’ve] lost my care. Carers [are] going to see different people without PPE on public transport. Felt too vulnerable to let her into the home. Knock on effects to my health. Wanted to employ someone but have struggled.”* – 24th November
- Responsibility for securing PPE fell on individual Disabled people
 - We were told in our focus group:
 - *“Issues around staffing have been an utter nightmare since March. I employ my own staff via the direct payments service. This has led to a lot of extra labour and stress compared to normal. As well as worry, and fear. Many have had difficulty getting PPE, but I bought a lot before lockdown and avoided this problem. At personal cost though.”* – 24th November

- Problems retaining existing care staff
 - We were told in our focus group:
 - *“My main Personal Assistant went awol indefinitely just before lockdown, when I decided to start shielding, just after 10th March, and said she would come back “when things calm down”. As we know, it's now late November and the pandemic isn't over.” – 24th November*

- Lack of support from Local Authorities
 - We were told in our focus group:
 - *“I found my Local Authority terrible at the time. They would never give anything in writing and suddenly phone me up and start talking when I was in the middle of work. There was an assumption, that as a disabled person with a care package, that I had nothing else to do, except answer phones and talk to them. I would say please send me an email, so a) I know who I'm talking to and b) I know what the issue is because I'm in the middle of teaching. I contacted councillors as well and they've been even less helpful. When I managed to contact them, they said that the offices have been telling us everything is fine. I was reaching out as a member of the community and they wouldn't listen to us. Neither the councillors or the Local Authority were interested and that was a big problem.” – 24th November*

Key Asks

Shielders immediately need a financial package that adequately meets their needs. They need help meeting the costs of high online delivery and food costs, as well as the loss of income from unemployment. Shielders were not given adequate support during the first lockdown and even less during the second. Shielders have been forgotten in the third national lockdown too. These issues require material support and can only be addressed through a financial package that is in place for the duration of the pandemic, which will not end in March 2021, as we do not know how effective vaccines will be until they have been rolled out to the whole UK population.

Immediate

Financial Stimulus and Support Package for Shielders¹⁰

- There must be a non means-tested financial package for Shielders to compensate for higher costs and loss of income caused by the loss of employment
- All Shielders must be eligible for furlough immediately and no return to work if Shielders have not been fully vaccinated

Support from supermarkets and online retailers

- Retailers must waive or lower delivery prices for Disabled people who cannot shop in store, including Shielders

Give Local Authorities funding to support Shielders

- Free food boxes must be resumed that adequately meet the dietary requirements of all until they're vaccinated

"Husband is under pressure to go back into work even though we can both work from home. The Shielder is at risk as well as those they live with." – 24th Nov

"If you have to give up work for whatever reason and you're Shielding, they should have a package that they can survive on. It shouldn't be done on how much you earn, it should be done so people can LIVE, feed themselves pay their utility bills and it should be there for at least a year because this [pandemic] is not going to end in March." – 24th Nov

¹⁰ [Workers asked to shield should not have to choose between their life and livelihood | TUC](#)

Vaccinations

- Vaccinations must be strongly encouraged unless there is a medical exemption
- Transparency about any side effects affecting non-healthy volunteers

“If I can’t have a vaccine, what’s the impact of that? They’ll be people Shielding that have very compromised immune systems that can’t have vaccines like me, so then it’s terribly important that everyone else does, so that I remain safe.” – 24th Nov

Access to Healthcare

- Non-essential healthcare must be resumed and priority access given to those with complex conditions that have the potential to have a devastating impact if there is a decline

“If you’ve been Shielding and you have complex conditions, then you have to be prioritised for healthcare because my conditions have gotten worse and I don’t think they can be reversed” – 24th Nov

Mental Distress Support

- There must be investment in support for mental distress to address the long-lasting impact of isolation and loneliness, which must be:
 - a. Co-produced with Disabled people
 - b. Culturally competent
 - c. In line with the Social Model of Mental Distress
- NHS volunteers and mutual aid groups must not replace adequate and well-resourced psychological services.

“The winter months and the second lockdown with no support from the government, not even the food parcel, really put into perspective how devalued and expendable I felt. I’ve been doing my best, but after 9 months of being alone, I’ve reached crisis point and my mental health has been the lowest it has ever been in 7 years. The worst part of it is that my psychiatric team can’t do anything other than offer me a couple of check in calls. Everyone else around me has been making plans for Christmas and the New Year, whilst I’ve been making plans to end my life.” – 24th Nov

Digital Accessibility

- Shielding Covid-19 guidance must be available in all accessible formats (EasyRead, BSL etc)
- Clarity between clinical and government shielding guidance is needed

“ Guidance isn’t accessible, hard to find on the GOV.UK website. Medical guidance says to not listen to government guidance. My GP has said to ignore it. Deciding about lockdown and shielding people is political. Following medical advice is important.” – 24th Nov

Auditing of Covid-secure organisations

- There must be a scheme that audits the Covid-security¹¹ of workplaces and institutions like universities
 - This should be done by a Health and Safety representative

“Believe there’s no such thing as Covid secure. There is no one checking that an environment is Covid secure. Difficult to believe the government or the employer about this. Why should shielding people trust ‘Covid secure?’.” - 24th Nov

Long term

Access to Technology

- All Disabled people must have access to good quality broadband, technology and appropriate training

Homeworking

- Homeworking must remain an option for Disabled people after the pandemic, but this should not take away from investing in making offices accessible

Equality Impact Assessments for future policies

- Policies and programmes coming out of Covid-19 should be co-produced with Disabled people and DDPOs
 - Specific barriers faced by Shielders must be considered as part of these Equality Impact Assessments

“A lot of local councils immediately put the Covid exemptions in without doing an impact assessment and without waiting for the evidence to see if it was necessary. So, whatever good policy comes out of this has got to actually be enforceable, so Disabled people aren’t left to legally challenge stuff from home whilst we’re shielding. Nothing has impeded my work more than having to shield still because people don’t pick up the phone, answer their emails or jump on Zoom. If someone ever wants to work from home again, all of the policies that come out of Covid has got to be enforceable and implementable. Disabled people also need to be informed of their rights because no one was telling them they could go into hospital with their PA, for example.” – 24th Nov

Conclusion

The pandemic has brought to light many issues that Disabled people, generally, and those shielding from Covid-19 are facing. They have ranged from problems with accessing food and healthcare to isolation and loneliness – all combining to have critical and, in some cases, irreversible consequences.

It is clear that the government must put in immediate measures to address the plight of Shielders. They include: a financial stimulus for Shielders, a vaccine education programme, resuming access to healthcare, investment in support for mental distress, improved digital accessibility and clarity of guidance and an

¹¹ [Many UK workplaces still not “Covid-Secure” – TUC poll reveals | TUC](#)

auditing scheme for Covid-secure organisations. These measures are time-sensitive and must be implemented now, especially in the context of a third national lockdown.

In the long term, Shielders need: support in accessing technology, homeworking to remain an option after the pandemic and Equality Impact Assessments to be carried out for policies that come out of Covid-19 that affect Disabled people. These recommendations are longer term and need to be considered throughout 2021.

Further Information

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